

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2014 MAY -6 AM 11:33
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

Farmers Mutual Hail Insurance Company of Iowa
Political Action Committee

ADDRESS (number and street)

6785 Westown Parkway

☐ Check if different than previously reported. (ACC)

West Des Moines

IA

50266

-7727

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00117614

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☐ January 31 Year-End Report (YE)
☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
☐ Mar 20 (M3)
☐ Apr 20 (M4)

- ☐ May 20 (M5)
☐ Jun 20 (M6)
☐ Jul 20 (M7)

- ☐ Aug 20 (M8)
☐ Sep 20 (M9)
☐ Oct 20 (M10)

- ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Dec 20 (M12) (Non-Election Year Only)
☐ Jan 31 (YE)

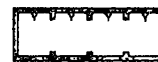
(c) 12-Day PRE-Election Report for the:

- ☐ Primary (12P)
☐ Convention (12C)

- ☐ General (12G)
☐ Special (12S)

☐ Runoff (12R)

Election on



in the State of



(d) 30-Day POST-Election Report for the:

- ☐ General (30G)

- ☐ Runoff (30R)

- ☐ Special (30S)

Election on



in the State of



5. Covering Period

01

01

2014

through

03

31

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

SCOTT McEntee

Signature of Treasurer

Scott McEntee

Date

04

15

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2014

To:

MM / DD / YYYY
03 / 31 / 2014

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	<div>2014</div>	<div>4977178</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>4977178</div>	
(c) Total Receipts (from Line 19)	<div>465725</div>	<div>465725</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<div>5442903</div>	<div>5442903</div>
7. Total Disbursements (from Line 31)	<div>556500</div>	<div>556500</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>4886403</div>	<div>4886403</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Report Covering the Period:

From:

01 / 01 / 2014

To:

03 / 31 / 2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized

(iii) TOTAL (add
Lines 11(a)(i) and (ii).....▶

(b) Political Party Committees

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

**12. Transfers From Affiliated/Other
Party Committees.....**

13. All Loans Received.....

14. Loan Repayments Received.....

**15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....**

**16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....**

**17. Other Federal Receipts
(Dividends, Interest, etc.).....**

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3)

(b) Levin Funds (from Schedule H5)

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

**20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶**

1 3 2 0 3 4

3 3 3 6 9 1

4 6 5 7 2 5

4 6 5 7 2 5

4 6 5 7 2 5

4 6 5 7 2 5

1 3 2 0 3 4

3 3 3 6 9 1

4 6 5 7 2 5

4 6 5 7 2 5

4 6 5 7 2 5

4 6 5 7 2 5

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	6 5 0 0	6 5 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6 5 0 0	6 5 0 0
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4 5 0 0 0 0	4 5 0 0 0 0
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements	1 0 0 0 0 0	1 0 0 0 0 0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5 5 6 5 0 0	5 5 6 5 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5 5 6 5 0 0	5 5 6 5 0 0

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds
(from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))▶
37. Offsets to Operating Expenditures
(from Line 15, page 3).....
38. Net Operating Expenditures
(subtract Line 37 from Line 36)▶

4 6 5 7 2 5
6 5 0 0
6 5 0 0

4 6 5 7 2 5
6 5 0 0
6 5 0 0

14031233231

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial) Rutledge, Ronald P.

A.

Mailing Address
240 Linden Drive

City State Zip Code
Waukee Iowa 50263

FEC ID number of contributing
federal political committee. C 0 0 1 1 7 6 1 4

Name of Employer Occupation
Farmers Mutual Hail Ins. Co. President FMH

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2 4 7 2 6

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

2 4 7 2 6

Full Name (Last, First, Middle Initial) Roggenburg, Darin

B.

Mailing Address
2035 134th Street

City State Zip Code
Clive, Iowa 50325

FEC ID number of contributing
federal political committee. C 0 0 1 1 7 6 1 4

Name of Employer Occupation
Farmers Mutual Hail Ins. Co. CFO FMH

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2 8 3 0 0

Date of Receipt

Amount of Each Receipt this Period

2 8 3 0 0

Full Name (Last, First, Middle Initial) Rutledge, Shannon

C.

Mailing Address
2273 NE 88th Street

City State Zip Code
Altoona, Iowa 50009

FEC ID number of contributing
federal political committee. C 0 0 1 1 7 6 1 4

Name of Employer Occupation
Farmers Mutual Hail Ins. Co. SVP FMH

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2 5 6 0 8

Date of Receipt

Payroll Deduction

Amount of Each Receipt this Period

2 5 6 0 8

SUBTOTAL of Receipts This Page (optional).....▶

7 8 6 3 4

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial) Faga, Patrick

Date of Receipt

MM	DD	YY
Payroll	Deduction	

Mailing Address
735 Roosevelt Street

City State Zip Code
Story City, Iowa 50248

FEC ID number of contributing federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

2	3	4	0	0
---	---	---	---	---

Name of Employer
Farmers Mutual Hail Ins. Co.

Occupation
SVP FMH

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2 3 4 0 0

Full Name (Last, First, Middle Initial) Ladehoff, Debbie

Date of Receipt

MM	DD	YY
Payroll	Deduction	

Mailing Address
2676 Brookview LN

City State Zip Code
Van Metter, IA 50261

FEC ID number of contributing federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

3	0	0	0	0
---	---	---	---	---

Name of Employer
Farmers Mutual Hail Ins. Co.

Occupation
AVP Training and Devel

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
3 0 0 0 0

Full Name (Last, First, Middle Initial)

Date of Receipt

MM	DD	YY
Payroll	Deduction	

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C 0 0 1 1 7 6 1 4

Amount of Each Receipt this Period

--	--	--	--	--

Name of Employer
Farmers Mutual Hail Ins. Co.

Occupation

Receipt For:
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....▶

5	3	4	0	0
---	---	---	---	---

TOTAL This Period (last page this line number only).....▶

1	3	2	0	3	4
---	---	---	---	---	---

14031233233

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 2

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

A.

Stabenow For U. S. Senate

Mailing Address

P.O. Box 4945

City

East Lansing, MI 48826

State

Zip Code

Purpose of Disbursement

Contribution

Candidate Name

Debbie Stabenow

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 / 27 / 2014

Amount of Each Disbursement this Period

250000

B.

NAMIC PAC

Mailing Address

122C. Street NW Suite 540

City

Washington, DC 20001

State

Zip Code

Purpose of Disbursement

Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Date of Disbursement

0 / /

Amount of Each Disbursement this Period

200000

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

450000

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☒ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Farmers Mutual Hail Insurance Company of Iowa Political Action Committee

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2014

The Governor Brandstad Committee

Mailing Address

2775 86th Street

City State Zip Code

Urbandale, IA 50322

Purpose of Disbursement
Contribution

011

Category/
Type

Amount of Each Disbursement this Period

50000

Candidate Name

Terry Brandstad

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2014

Mutual Insurance Association of Iowa

Mailing Address

6750 Westown Parkway #200-322

City State Zip Code

West Des Moines, IA 50265

Purpose of Disbursement
Contribution

11

Category/
Type

Amount of Each Disbursement this Period

50000

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

011

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

100000

TOTAL This Period (last page this line number only)..... ►

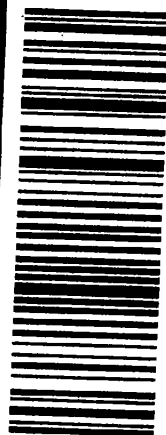
550000

14031233236

CERTIFIED MAIL™



Farmers Mutual Hail
Insurance Company of Iowa
6785 Westown Parkway | West Des Moines, Iowa 50266



7010 0290 0000 1083 7297


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MAILED
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MAY 02 2014
50266



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FEC MAIL CENTER

General Election Commission
999 F Street NW
Washington, DC 20543

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 5/2/14
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	5/6/14 DATE PREPARED

14031233237